United States Department of Agriculture



VIA ELECTONIC MAIL

Date: August 23, 2005

COLORADO BULLETIN NO.: CO-250-05-06

SUBJECT: Revision to Payment Procedures

TO: All Colorado Natural Resources Conservation Service Offices

PURPOSE: To disseminate information about payment and obligation procedures for <u>ALL</u> vendors

EXPIRATION DATE: September 30, 2005

Effective immediately, ALL vendors with whom we do business must be paid through Electronic Fund Transfer (EFT), excluding credit card purchases. We must comply with the Debt Collection Improvement Act (DCIA) of 1996 which mandates all federal disbursements be made through electronic fund transfer (EFT).

All agreements, invoices, or applications for payment or obligation received in Financial Management (FNM) must have the vendor's Tax Identification Number (TIN) or Social Security Number (SSN) on it. If no EFT information is in the National Finance Center's (NFC's) database, the document will be returned to sender to obtain a signed SF-1199a (Direct Deposit form - attached). At this time, NFC is not accepting EFT waiver requests. This does not apply to vendors input in ProTracts.

As a reminder, please use your purchase card whenever possible. If vendors are not willing to take the credit card or give you their bank account information, we will not be able to conduct business with them.

Please contact Lynn Sansburn, (720) 544-2830, with any questions you may have about this new payment process.

/s/Jeff Burwell (for)

ALLEN GREEN
State Conservationist

Attachment

DIST: O

OMB No. 1510-0007



Call 1 (800) 333-1795 to sign up by telephone.

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Please refer to the information on the reverse side before completing this form.

You must complete a separate form for each type of federal payment (social security, supplemental security income, veterans' benefits, etc.).

You are responsible for keeping the paying agency informed of any name or address changes. Return the completed form to the federal agency from which you will be receiving Direct Deposit payments. Check the Government Listings section of your local telephone directory for the nearest office.

PLEASE NOTE: In many cases you can also sign up for Direct Deposit by telephone. Toll-free numbers are listed below:

Social Security Administration

(800) 772-1213 (800) 325-0778 TTY

Railroad Retirement Board

(Automated System) (800) 808-0772 (312) 751-4701 TTY Office of Personnel Management

(888) 767-6738 (800) 878-5707 TDD

Department of Veterans Affairs

(877) 838-2778 (800) 827-1000 (800) 829-4833 TDD

OUR NAME (last, first, middle initial)	TYPE OF ACCOUNT CHECKING SAVINGS					
NAME OF PERSON ENTITLED TO PAYMENT (if different from above)	9-DIGIT ROUTING NUMBER (see sample check on reverse side)					
OUR ADDRESS (street, route, P.O.box, apartment number)						
ITY (or APO/FPO) STATE ZIP CODE	ACCOUNT NUMBER (see reverse side)					
DUR TELEPHONE NUMBER						
TYPE OF PAYMENT (check only one)	D. CERTIFICATION I certify that I am entitled to receive the payment identified above, and tha read and understand the back of this form. In signing this form, I authorize payment to be sent to the financial institution named in Part C above, to b deposited into the account above.	this				
	SIGNATURE DATE					
SOCIAL SECURITY CIVIL SERVICE RETIREMENT SUPPLEMENTAL SECURITY INCOME VA COMPENSATION OR PENSION	FOR JOINT ACCOUNT HOLDERS I certify that I have read the SPECIAL NOTICE TO JOINT ACCOUNT HOLDERS on the back of this form.					

PLEASE READ THIS CAREFULLY

PRIVACY ACT NOTICE

Your social security number and the other information requested will allow the federal government to make payments to you by Direct Deposit. This collection of information is authorized by Title 31 of the United States Code, Section 3332(g). Also, Executive Order 9397, November 22, 1943, authorizes the use of your social security number. Your social security number is requested to ensure the accurate identification and retention of records pertaining to you and to distinguish you from other recipients of federal payments.

This information will be disclosed to the Department of the Treasury or another disbursing official to process federal payments to you by Direct Deposit. This information may also be disclosed to a court, congressional committee or another government agency as authorized or required by federal law and to your financial institution to verify receipt of your federal payments. Although providing the requested information is voluntary, your Direct Deposit payment may be delayed or Treasury may be unable to send it if you fail to provide the information.

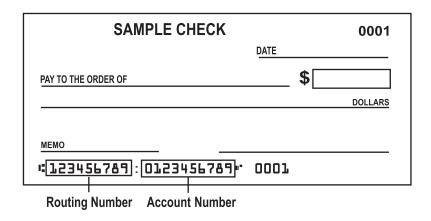
SPECIAL NOTICE TO JOINT ACCOUNT HOLDERS

If your account is a joint account and receives Direct Deposit benefit payments, you must inform the federal agency and the financial institution of the death of a beneficiary. Payments sent by Direct Deposit after the date of death or ineligibility of a beneficiary (except for salary payments) must be returned to the federal agency. The federal agency will then determine if the survivor is eligible for benefits.

CANCELLATION

Your payment will be sent by Direct Deposit until the federal agency that issues the payments is notified to cancel, such as in the case of death or legal incapacity of the payment recipient.

Your financial institution may cancel your Direct Deposit authorization. Your financial institution is required to give you written notice 30 days in advance of the cancellation date. If this occurs, you must notify the federal agency that the Direct Deposit authorization was cancelled.



BURDEN ESTIMATE STATEMENT

The estimated average time (burden hours) associated with filling out this paperwork is 10 minutes per respondent or recordkeeper, depending on individual circumstances. Comments concerning the accuracy of this time estimate and suggestions for reducing the burden should be directed to the Financial Management Service, Administrative Programs Division, Records and Information Management Program, 3700 East-West Highway, Room 135, Hyattsville, MD 20782. THIS ADDRESS SHOULD ONLY BE USED FOR COMMENTS AND/OR SUGGESTIONS CONCERNING THE AMOUNT OF TIME SPENT COLLECTING THE DATA. DO NOT SEND THE COMPLETED PAPERWORK TO THE ADDRESS ABOVE FOR PROCESSING.